

ISSUE SLIP STAPLE AREA (for additional cross references)

POSIT-CN	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Return ill</i>		<i>03-13-01</i>
O.I.P.E. CLASSIFIER	<i>TL</i>		<i>4-1-01</i>
FORMALITY REVIEW	<i>A-S</i>	<i>943</i>	<i>04-3-1</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions .  
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